

PART B - FEE(S) TRANSMITTAL

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26384 7590 04/05/2006
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APPLICATION NO. 10/077,730	FILING DATE 02/19/2002	FIRST NAMED INVENTOR Gregory M. Nichols	ATTORNEY DOCKET NO. N.C. 83,180	CONFIRMATION NO. 3168
TITLE OF INVENTION: AUTOMATIC GAIN CONTROL FOR DIGITIZED RF SIGNAL PROCESSING			06/09/2006 MGBREM2 00000056 500281 10077730	
			01 FC:1501 1400.00 DA	
			02 FC:1504 300.00 DA	
			TOTAL FEE(S) DUE \$1700	DATE DUE 07/05/2006

APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1400	PUBLICATION FEE \$300
EXAMINER FILE, ERIN M	ART UNIT 2611	CLASS-SUBCLASS 375-345000	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. John J. Karasek
2. L. George Legg
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
- PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.
- (A) NAME OF ASSIGNEE The United States of America as represented by the Secretary of the Navy
- (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☒ Government

- 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies _____

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- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0281 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name

John J. Karasek

Date

5/24/06

Registration No. 35,112

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